RECEIVED OCT 02 2002 $m{\$}$ lease type a plus sign (+) inside this box \longrightarrow \mid $_{m{+}}\mid$ Approved for use inrough 193172002. OMS U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE e Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 09/888.34 TRANSMITTAL Filing Date June 22, 2001 **FORM** First Named Inventor Jeffry Weers et al. (to be used for all correspondence after initial filing) Group Art Unit 1617 **Examiner Name** E. Webman Total Number of Pages in This Submission Attorney Docket Number | 0103.00 **ENCLOSURES** (check all that apply) Assignment Papers After Allowance Communication Fee Transmittal Form (for an Application) to Group Appeal Communication to Board Fee Attached Drawing(s) of Appeals and Interferences Licensing-related Papers Appeal Communication to Group Amendment / Reply X (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) Provisional Application Status Letter Power of Attorney, Revocation Change of Correspondence Other Enclosure(s) (please Extension of Time Request Address identify below): Terminal Disclaimer **Express Abandonment Request** Request for Refund Information Disclosure Statement CD, Number of CD(s). Certified Copy of Priority Document(s) Remarks Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm or Individual name Inhale Therapeutic Systems, Inc. Signature Date **CERTIFICATE OF MAILING** I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class

Typed or printed name

Kathy Honnert

Signature

Mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 9/24/02

Date 9/24/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/17 (11-01) 2002 oved for use through 10/31/2002, OMB 0651

For each additional invention to be examined (37 CFR § 1.129(b))

Request for expedited examination of a design application

Request for Continued Examination (RCE)

SUBTOTAL (3)

(\$)

180.00

D Under the	e Paperwork Re	eduction Act of 1995, n	o persons are requ	ired to r	espond	U.S to a c	. Paten	t and Tr	ademark Office; U.S. DEPARTMENT or unless it displays a valid OME	OF COMMERCI		
FEE TRANSMITTAL						Da						
		KANSI	/III I A	Li	Appli	catio	n Num	ber	09/888,311	UECE		
for FY 2002 Patent fees are subject to annual revision. PAPPICAN SMALL AMOUNT OF PAYMENT (\$) 180.00					Filing Date			June 22, 2001				
					First Named Inventor		entor	Jeffry Weers et al.	UCT 130			
							,	E. Webman Trou				
					Group Art Unit			E. Weblian	JENITE-			
							No	1617 0103.00	CIVIER 16			
					Examiner Name E. Webman Group Art Unit 1617 Attorney Docket No. 0103.00							
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)								
Check	Credit card	☐ Money ☐ d	Other None	3. ADDITIONAL FEES								
Order Order					Large Entity Small Entity							
	t Account:			Fee	Fee	Fee		_	Fee Description	Fee Paid		
Deposit Account	500348			Cod	e (\$)	Cod	e (\$)		·			
Number Deposit	000010			105	130	205	65	Surcha	rge - late filing fee or oath			
Account Name	Inhale The	erapeutic Syster	ns	127	50	227	25	Surcha cover s	rge - late provisional filing fee or			
The Commiss	sioner is author	rized to: (check all tha	t apply)	139	130	139	130		nglish specification			
Charge fee	e(s) indicated be	low Credit ar	ny overpayments		2,520		2,520		ignal specification ig a request for <i>ex parte</i> reexamination			
m '	-	(s) during the pendency	• • •			112	· ·		sting publication of SIR prior to	' 		
		elow, except for the fil	ing fee	l ''-	020	ľ -	020		ner action			
to the above-identified deposit account. FEE CALCULATION				113	1,840*	113	1,840*		sting publication of SIR after ner action			
1 PACICE	FEE C	ALCOLATION		115 ⁻	110	215	55		on for reply within first month			
	Small Entity			116	400	216	200	Extens	on for reply within second month			
Fee Fee	Fee Fee	Fee Description	Fee Paid	117	920	217	460	Extensi	on for reply within third month			
Code (\$) 101 740	Code (\$) 201 370	Utility filing fee	Tee Taid	118	1,440	218	720	Extens	on for reply within fourth month			
106 330	206 165	Design filing fee		128	1,960	228	980	Extens	on for reply within fifth month			
107 510	207 255	Plant filing fee		119	320	219	160	Notice	of Appeal			
108 740	208 370	Reissue filing fee		120	320	220	160	Filing a	brief in support of an appeal			
114 160	214 80	Provisional filing fee		121	280	221	140	Reques	st for oral hearing			
	•	SUBTOTAL (1) (\$	2)	B .	1,510		1,510		to institute a public use proceeding	-		
2 EVIDA				140		240	55		to revive - unavoidable			
Z. EXTRA	CLAIN FEE		from	i	1,280	241			to revive - unintentional			
Total Claims			low Fee Paid	142 143		242 243		•	ssue fee (or reissue) issue fee	-		
Total Claims Independent	-20*			143	620		310		ssue fee			
Claims Multiple Depe		^_ 		122	130		130		ns to the Commissioner			
	*****	<u> </u>		123	50	123	50		sing fee under 37 CFR 1.17(q)			
Large Entity				126	180	126	180		sing lee under 37 CFN 1.17(q)	180.00		
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description		l	40					100.00		
103 18	203 .9	Claims in excess of	120	581	40	581	40	propert	ing each patent assignment per y (times number of properties)			
102 84	202 42	Independent claims		146	740	246	370		submission after final rejection			
104 280	204 140	Multiple dependent	ala: ::	I					R § 1.129(a))	1		

SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Michael J. Rafa	<i>h</i> /	Registration No. (Attorney/Agent) 38,740	Telephone	650-631-5053	
Signature	mul	Ph		Date	9/23/02	

149 740

179 740

169 900 249 370

169 900

*Reduced by Basic Filing Fee Paid

370 279

Other fee (specify)

280

109

204 140

SUBTOTAL (2)

**or number previously paid, if greater; For Reissues, see above

209 42

210

Multiple dependent claim, if not paid

** Reissue independent claims over original patent

** Reissue claims in excess of 20 and over original patent

(\$)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.



OCT 02 2002

PTO/SB92 (08-00)

Approved for use through (1/18/2002) AMB 0651-0031
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF SOME 0651-0031
o a collection of information unless it contains a valid OMB control of the contains a valid OMB control of the control of the

inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Assistant Commissioner for Patents Washington, D.C. 20231

on September 24, 2002

Date

Signature

Kathy Honnert

Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

The following papers listed below are submitted:

U.S. Patent Application Serial No. 09/888,311 filed June 22, 2001

Amendment Transmittal

Amendment

Fee Transmittal

IDS

PTO/SB/08A and 08B

References

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.